

**ECIP/HEAP PAYMENT REQUEST AND CONFIRMATION  
(NON-REGULATED UTILITY COMPANIES ONLY)**

To:	Utility Company's Name:	Attention:		
From:	Agency's Name:			Date of Request:
	Mailing Address:	City:	State:	Zip:
	Agency Contact Person:			Phone:

*Instructions to non-regulated utility companies:*

1. Once a client's account has been credited, enter the date in the "DATE CREDITED" column.
2. After all accounts have been credited, sign and date the form in the space provided below.
3. Return this form to the agency's contact person at the address identified above.

*The following utility payments are being made on behalf of these clients:*

	Name and Address of Client	Utility Account #	Payment Amount	Date Credited
1.			\$	
2.			\$	
3.			\$	
4.			\$	
5.			\$	
6.			\$	
7.			\$	
8.			\$	

**UTILITY COMPANY CERTIFICATION**

*I hereby certify that the referenced accounts were credited in the amounts shown.*

Name/Title	Signature of Approval	Date
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**AGENCY USE ONLY**

Total Payments	\$	Check Number	#
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**ECIP/HEAP PAYMENT REQUEST AND CONFIRMATION**  
**CSD 415 (Rev. 06/01/06)**  
**Instructions**

**This form will be used by the agency and non-regulated utility company in compliance with Section 2605(b)(7), item (B) of the Low-Income Home Energy Assistance Act of 1981.**

1. Agency completes the "To" section of the form entering the non-regulated utility company information.
2. Agency completes the "From" section of the form entering the agency's name, address, and contact person.
3. Agency enters the list of client information, including utility account # and amount of payment.
4. Agency enters "Total Payments" amount and the "Check Number" information which corresponds to data from Step 3.
5. Agency forwards form to identified non-regulated utility company for review and completion.
6. Upon return of form from utility company, Agency reviews and verifies the amount credited for each client.
7. Agency retains this form on file for monitoring purposes.

*Contractor's equivalent form is allowed, but must be pre-approved by CSD.*